

Defense Logistics Agency



How to Successfully fill out an End Use Certificate Application

***A walkthrough guide for
Private/Parochial Schools***



Outline

- **Things to Note**
- **Step by Step guide**
- **General Info**
- **General Info Addresses**
- **Section I**
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- **Supplemental Documents**
- **Points of Contact**



Things to Note

- Every block must have an entry; some blocks have been pre-populated for the CFL Program. If the information being requested does not apply to your situation, **ONLY** use the following entries: “NONE”, “DOES NOT APPLY”, or “NOT APPLICABLE”. **** Do not use N/A, N/R, or draw a line through the entry.**
- All entries must be typed or clearly printed.
- The same person that signed the MOA (Principal, Superintendant, or Executive/Administrator) will complete the EUC. This means all fields for personal data should be for this official.



Step by Step Guide

- The next few slides will give you a step by step guide to fill out the End Use Certificate (EUC) for your School. Please use the text and pictures ~~to assist~~ you. The 's will point you to the next step in the process.
- First open the EUC on the web found at:
<https://www.dispositionservices.dla.mil/rtd03/cfl/CFLEUC.pdf>



General Info

- First input your FULL legal name to include last, first, and middle. If you do not have a middle name, please write NMN for “No Middle Name”.
 - If your full legal Middle Name is only an Initial then please indicate by writing (Initial Only)
- Next input your SSN, Date of Birth, Place of Birth, and Telephone

END-USE CERTIFICATE		FOR AGENCY USE ONLY				Form Approved OMB No. 0704-0382 Expires Feb 29, 2008		
(STATEMENT REGARDING DISPOSITION AND USE OF PROPERTY) (Please read Privacy Act Statement on reverse before completing this form. If additional space is required, use separate sheets and identify by Block Number.)		TSC CLD	PRIMARY PURCHASER	SUB-PURCHASER				
				1	2		3	4
				YES				
TYPE OR PRINT ALL INFORMATION		NO						
<p>The public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to DoD, Washington Headquarters Services, DIOR (0704-0382), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN your form to either of these addresses. RETURN COMPLETED FORM TO THE OFFICE STATED ON THE IFB, SOLICITATION OR PROPOSAL.</p>								
<p>INSTRUCTIONS. This form <u>must be fully completed</u> by all applicants for Munitions List Items (MLI)/Commerce Control List Items (CCLI) prior to acceptance by the U.S. Government and constitutes an integral part of this bid. The information given must be true and correct and will become a part of this contract. Every block MUST have an entry. If necessary, insert "NONE," "SAME AS BLOCK X" or "NOT APPLICABLE" (do not use "N/A"). If the applicant is acting solely as at Agent, a DLA Form 1822 must be signed by the Principal. The term Approving Official is used to indicate the person authorized to act for the U.S. Government (Sales Contracting Officer Plant Clearance Officer or other designated individual). FOR ALL SALES OF PROPERTY APPROVED BY PLANT CLEARANCE OFFICERS UPON THE REMOVAL OF THE PROPERTY, ALL DOCUMENTATION REQUIRED BY THIS FORM WILL BE FORWARDED TO THE IDENTIFIED TRADE SECURITY CONTROL OFFICE.</p> <p>The following applies to all property subject to sale using this form: the use, disposition, export, or re-export of this property, is subject to the publications, penalties, and other provisions of the economic programs administered by the Office of Foreign Assets Control, U.S. Treasury Department, 31 CFR Chapter V.</p>								
THIS STATEMENT IS SUBMITTED IN CONNECTION WITH:		LINE ITEM NUMBER/COMMODITY						
<input type="checkbox"/> SALE <input type="checkbox"/> EXCHANGE <input checked="" type="checkbox"/> OTHER: Computers for Learning		See Attached Memorandum of Agreement						
NAME (Last, First, Middle)		SSN/ALIEN CARD NO./COUNTRY ID						
DATE OF BIRTH (MM/DD/YY)	PLACE OF BIRTH (City or County, State, Country)				TELEPHONE NUMBER (Include Area Code)			
MAILING ADDRESS			PHYSICAL ADDRESS					

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General Info - Addresses

- Next in the “Mailing Address” field input the school/organizations Mailing Address. (Address you receive school pertinent mail at)
- Then in the “Physical Address” box input your personal

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TYPE OR PRINT ALL INFORMATION				1	2		3	4
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		NO						
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THIS STATEMENT IS SUBMITTED IN CONNECTION WITH: <input type="checkbox"/> SALE <input type="checkbox"/> EXCHANGE <input checked="" type="checkbox"/> OTHER: Computers for Learning		LINE ITEM NUMBER/COMMODITY See Attached Memorandum of Agreement						
NAME (Last, First, Middle)		SSN/ALIEN CARD NO./COUNTRY ID						
DATE OF BIRTH (MM/DD/YY)		PLACE OF BIRTH (City or County, State, Country)				TELEPHONE NUMBER (Include Area Code)		
MAILING ADDRESS		PHYSICAL ADDRESS						

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Section I

- In Section I first you will enter your Federal Tax Number.
- Secondly, enter the Complete School Name (No abbreviation). This must match the name on your MOA and Online Application.
- Next input the Physical Address of the School/Organization **AND** Business phone number.
- Lastly, Make sure “Not Applicable” is hand written in the empty space of #7.

SECTION I. GENERAL INFORMATION		
APPLICABILITY. <i>This statement applies to the property for which we have submitted our bid/offer pursuant to the above identified invitation.</i>		
1. TYPE OF FIRM <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input checked="" type="checkbox"/> OTHER (Specify): School		
2. NATURE OF END-USER'S BUSINESS <div>Education</div>	3. NATURE OF PRINCIPAL'S BUSINESS <div>Education</div>	4. FIRM'S ID/FEDERAL TAX NUMBER
5. BUSINESS/CORPORATION HEADQUARTERS		6. BRANCH OFFICE
A. NAME		A. NAME <div>Not Applicable</div>
B. ADDRESS (Physical location)		B. ADDRESS (Physical location) <div>Not Applicable</div>
7. ALL CORPORATE OFFICERS, PARTNERS AND/OR AGENTS ARE TO PROVIDE, ON SEPARATE SHEETS OF PAPER, THEIR NAMES, ADDRESSES, SSNs, DATES AND PLACES OF BIRTH. FAILURE TO PROVIDE THIS INFORMATION COULD RESULT IN SIGNIFICANT DELAY OR DENIAL OF THE AWARD.		



Section II

- The only part of Section II that you must complete is your “Supplementary Address”. For this field insert “TBA” for To Be Announced.

SECTION II. END USE/USER INFORMATION. If this is a negotiated exchange, identify the property being exchanged: <u>Not Applicable</u>		
1. PURPOSE. THE PROPERTY REFERRED TO IN ABOVE IFB/OFFER NUMBER WILL BE UTILIZED FOR THE FOLLOWING: Enter and 'X' in the appropriate item(s) below. In the case of resale, Item 1.F. or 1.G. MUST be marked.		
<input checked="" type="checkbox"/> A. Retention for the following specific use (see note): Computers for Learning	<input type="checkbox"/> B. Resold in the form received for the following use (see note) : Not Applicable	<input checked="" type="checkbox"/> C. The property will not be sold or otherwise disposed of for use outside of the United States or to non-U.S. Citizens/Nationals in the United States.
<input type="checkbox"/> D. The property may be exported or re-exported in the form received to the following country/countries: Not Applicable	<input type="checkbox"/> E. Resale after following alteration (description of final production) : in (Country/Countries) : <u>Not Applicable</u> and distribution in (Country/Countries) :	<input type="checkbox"/> F. If sold, name, address, and telephone number of sub-purchaser(s) : Not Applicable
<input checked="" type="checkbox"/> G. The customers are unknown at this time. If required by the contract/transfer document, I will obtain prior written approval for the resale of any of the property covered by this contract.		
ADDITIONAL INFORMATION: State any other material facts relating to end user and use of the property which may be of value in considering the proposal: Computers for Learning Program		
DOD Accounting Code - H91236 - Supplementary Address: 1		
NOTE: Example of specific uses: AIRCRAFT. The bidder/recipient certifies that the aircraft will be used: as a flyable aircraft; as a nonflyable aircraft to be used only for parts, display, or ground instruction, etc.; for resale as a flyable aircraft.		



Section III

- There are no input requirements for Section III. Please just read and understand.

SECTION III. UNDERSTANDING AND NOTIFICATIONS

1. The use, disposition, export and re-export of this property is subject to all applicable U.S. Laws and Regulations, including but not limited to the Arms Export Control Act (22 USC 2751 et seq.); Export Administration Act of 1979 (50 USC App. 2401 et seq.) as continued under Executive Order 12924; International Traffic in Arms Regulations (22 CFR 120 et seq.); Export Administration Regulations (15 CFR 730 et seq.); Foreign Assets Control Regulations (31 CFR 500 et seq.) and the Espionage Act (18 USC 793 et seq.); which, among other things, prohibit:

A. The making of false statements and concealment of any material information regarding the use or disposition, export or re-export of the property and

B. Any use, disposition, export or re-export of the property not permitted by applicable statute and regulation.

2. The submission of false or misleading information and/or concealment of any material facts regarding the use, disposition or export of this property may constitute a violation of provisions of 18 USC 793/1001, 22 USC 2778/2779, 50 USC App. 2410, and 50 USC App. 1-44. Sanctions for violations will be in conformity with U.S. laws and regulations (including Federal Acquisition Regulations and DoDD 2030.8) and may include the denial of U.S. export privileges and of any participation in future U.S. Government contracts.

3. Transfers of MLI and CCLI property by purchasers/bidders are subject to the requirements of the appropriate licensing department or agency. In many cases, an export license or other authorization may be required. With respect to MLI, registration of the purchaser's/bidder's business with the Department of the State may also be required. It is the responsibility of the purchaser/bidder to determine what the applicable requirements may be and to obtain all necessary authorization or approvals.

4. When MLI/CCLI property is transferred, the information in this form regarding the above laws and regulations must be passed to the subsequent purchaser/receiver. Records of Resale in buyer's possession should be available for Trade Security Controls Office review, if requested.

5. The Invitation For Bid and Sale/Exchange Contract number can be referenced when submitting an application for an export license or other authorization to the Department of State for MLI or Department of Commerce for CCLI.

6. The Government expects the Purchaser/Recipient to cooperate with all authorized Government representatives to verify the existence and condition of MLI/CCLI.



Section IV

- First for the boxes under question 4 you will need to mark the box that applies to you.
- Secondly input your FULL legal name to include first, middle, and last. If you do not have a middle name, please write NMN for “No Middle Name”.
- Lastly, Sign your FULL name. This includes First, middle (if you have one), and last. And please date the EUC.

SECTION IV. CERTIFICATION STATEMENT TO BE SIGNED BY BIDDER AT TIME OF RESPONSE TO IFB					
<p>1. I do certify that all information given in this Statement Regarding Disposition and Use of Property is true and correct to the best of my knowledge and belief and have not knowingly omitted any information which is inconsistent with this statement. I understand this statement will be referred to and be a part of the contract of sale/exchange with the U.S. Government. I agree to submit a written request for amendment of this statement to the Approving Official prior to effecting any change of fact or intention from that stated herein or in any prior amendment, whether occurring before or after the release of the commodities, and not to effect such changes without first receiving written approval of the Approving Official.</p> <p>2. I acknowledge having been advised that the MLI/CCLI property I purchased is controlled by the U.S. Government and in many cases cannot be transferred (exported, sold or given) to a foreign country, a non-U.S. Citizen/National or a non-Permanent US Resident without a valid State/Commerce Department export authorization. Should I transfer this property to a foreign country, a non-U.S. Citizen/National or a non-Permanent US Resident, I will obtain any required authorization before making such transfers. I will not transfer this property to countries, regimes and nationals targeted under the sanctions program administered by the U.S. Treasury Department's Office of Foreign Assets Control.</p> <p>3. Neither the applicant, corporate officers, directors or partners is:</p> <p>A. The subject of an indictment for or has been convicted of violating any of the U.S. Criminal statutes enumerated in 22 CFR 120.27 since the effective date of the Arms Export Control Act, Public Law 94-329, 90 Stat. 729 (June 30, 1976) ; or</p> <p>B. Ineligible to contract with, or to receive, a license or other approval from any agency of the U.S. Government.</p> <p>4. The person signing this DLA Form 1822 is:</p> <p><input type="checkbox"/> a Citizen of the United States of America, or</p> <p><input type="checkbox"/> lawfully admitted to the United States for Permanent Residence and maintains such residence under the Immigration and Nationality Act, as amended (8 USC 1101 (a), 20, 60 Stat. 163) , or</p> <p><input type="checkbox"/> a Citizen of _____ , and/or</p> <p><input type="checkbox"/> is an official of a foreign government entity in the United States.</p> <table border="1"><tr><td>A. NAME (Type or print)</td><td>B. SIGNATURE</td><td>C. DATE SIGNED</td></tr></table>			A. NAME (Type or print)	B. SIGNATURE	C. DATE SIGNED
A. NAME (Type or print)	B. SIGNATURE	C. DATE SIGNED			

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Supplemental Documents

- Once the EUC application is complete you will need to fax or email it to 269-961-5841 or DODCFL@dla.mil. Along with this completed application we will need a color scanned copy of the EUC applicants Photo ID.
- Acceptable forms of Photo ID are: State issued ID or Drivers License, Passport, Passport Card, Military ID, or Government ID.
- The Photo ID **MUST** be scanned and emailed. **NO FAX COPIES WILL BE ACCEPTED**. Please make sure that your photo is clear, in color, and the information on the ID is legible. It would be appreciated if you would enlarge your ID to 200-300%.



Points of Contact

- For more information on DOD CFL Program:
www.dispositionservices.dla.mil/rtd03/cfl/index.html
- To Contact the CFL office:
DODCFL@dlam.mil